

BEST AVAILABLE COPY

| MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-876) | | | | | | | SERIAL NO. <i>51,234,698</i> | FILING DATE | | | | | |
|--|----------|------|------------------------|------|------------------------|------|---------------------------------|-------------|------|------|------|------|------|
| | | | | | | | APPLICANT(S) | | | | | | |
| CLAIMS | | | | | | | | | | | | | |
| | AS FILED | | AFTER 1st AMENDMENT | | AFTER 2nd AMENDMENT | | | • | | • | | • | |
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| TOTAL CLAIMS | | | | | | | TOTAL CLAIMS | | | | | | |